PART B - FEE(S) TRANSMITTAL

Complete and send	this form, together w	ith applicable			Mail Stop ISSUE Commissioner fo P.O. Box 1450 Alexandria, Virg (571)-273-2885				
INSTRUCTION: This for appropriate. All where con indicated unless convenient maintenance fee notification	rm should be used for tran reconstruction including the low or directed otherwise	smitting the ISSU Patent, advance or in Block 1, by (a	JE FEE and ders and noti	PUBLIC fication a new c	OF THE CATION FEE (if required of maintenance fees we correspondence address;	ired). Blocks 1 through 5 s vill be mailed to the current and/or (b) indicating a sep	should be completed where t correspondence address as arate "FEE ADDRESS" for		
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)					Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.				
MONSANTO COMPANY 800 N. LINDBERGH BLVD. ATTENTION: GAIL P. WUELLNER, IP PARALEGAL, (E2NA)					Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service EXP Mall #EV690683770US addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.				
ST. LOUIS, MO 63167 09/18/2006 ZJUHAR2 00000002 134125 10065800					Michelle Ludwig / (Depositor's name)				
01 FC:1501 02 FC:1504 03 FC:8001	1400.00 DA 300.00 DA 9.00 DA				Wickelle Septemb	rudwig 14, 20016	(Signature)		
APPLICATION NO.	FILING DATE		FIRST NAMEI	INVEN	TOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.		
10/065,800 TITLE OF INVENTION: PROTEIN, GAI	11/20/2002 REVERSIBLE MALE ST	ERILITY IN TRA	Shihshiel ANSGENIC P	_	*	38-21(52573) OF A GA-INSENSITIVE	6564 MUTANT		
APPLN. TYPE	SMALL ENTITY	ISSUE FEE		PU	UBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE		
nonprovisional	NO	\$1400			\$300	\$1700	09/18/2006		
EXAMINER		ART UNIT		C	LASS-SUBCLASS				
FOX, D	1638			800-274000					
 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 				2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.					
3. ASSIGNEE NAME AND					•• •				
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.									
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)									
Monsanto Technology LLC St. Louis, Missouri									
Please check the appropriate	assignee category or category	ries (will not be pr	inted on the p	atent) :	☐ Individual 🏖 Co	orporation or other private gr	oup entity Government		
4a. The following fee(s) are X Issue Fee X Publication Fee (No s X Advance Order - # or	mall entity discount permitte		☐ Payment	in the ar	mount of the fee(s) is en it card. Form PTO-2038 ereby authorized by cha Number 13-412		edit any overpayment, to		
5. Change in Entity Status a. Applicant claims S	(from status indicated above MALL ENTITY status. See	•				LL ENTITY status. See 37 C			
The Director of the USPTO NOTE: The Issue Fee and P interest as shown by the received	is requested to apply the Iss ublication Fee (if required) ords of the United States Pat	ue Fee and Publica will not be accepted ent and Trademark	tion Fee (if and from anyone Office.	y) or to other t	re-apply any previousl han the applicant; a regi	y paid issue fee to the applic istered attorney or agent; or t	ation identified above. the assignee or other party in		
Authorized Signature	1105					14/06			

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

46,249

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M. Todd Rands

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

CERTIFICATE UNDER 37 C.F.R. §1.10

I hereby certify that the documents enclosed herein are being deposited with the United States Postal Service on this day of _______, 2006 in an envelope as "Express Mail Post Office to Addressee" Mailing Label Number EV690683770US addressed to: MAIL STOP ISSUE FEE, Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

In re ap	plication of:	Shihshieh Huang)	Examiner: David T. Fox
Serial No.: 10/065,800				
Filed: I	November 20, 20	002)	Group Art Unit: 1638 Conf. No. 6564
For:		e Sterility in Transgenic Plants of a GA-Insensitive Mutant)	Conf. 140. 0304

MAIL STOP ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

Protein, gai

TRANSMITTAL LETTER

Transmitted herewith are the following documents in the above-identified application.

- X PTOL-85, Part B Issue Fee Transmittal
- X Return Postcard
- X If an extension or an additional extension of time is required, but is not enclosed, please consider this a conditional petition therefor and charge Deposit Account 13-4125 accordingly.
- X Please debit \$1,700.00 from Deposit Account 13-4125 for the fee required with this filing.
- X Please charge any deficiencies or credit any overpayment to Deposit Account 13-4125. A duplicate copy of this sheet is attached.

Respectfully submitted,

M. Todd Rands

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